

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 216 OF 726 | |
| | (check only one) | | | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NRSC

| | | | |
|---|--------------------|---|--|
| A. Full Name (Last, First, Middle Initial) MR. LAWRENCE JORDAN | | | Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2015 |
| Mailing Address 5105 HY 59 NORTH | | | Transaction ID : SA11.11430039 |
| City LUFKIN | State TX | Zip Code 75901-8525 | Amount of Each Receipt this Period 100.00 |
| FEC ID number of contributing federal political committee. C | | | CONTRIBUTION |
| Name of Employer SELF EMPLOYED | | Occupation CONTRACTOR | Amount of Each Receipt this Period 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 300.00 | |

| | | | |
|---|--------------------|---|--|
| B. Full Name (Last, First, Middle Initial) MR. CHARLES H. JOYCE | | | Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2015 |
| Mailing Address P.O. BOX 330 | | | Transaction ID : SA11.11407422 |
| City WELLSVILLE | State NY | Zip Code 14895-0330 | Amount of Each Receipt this Period 33400.00 |
| FEC ID number of contributing federal political committee. C | | | CONTRIBUTION |
| Name of Employer OTIS EASTERN SERVICE INC. | | Occupation EXECUTIVE | Amount of Each Receipt this Period 33400.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 33400.00 | |

| | | | |
|---|--------------------|---|--|
| C. Full Name (Last, First, Middle Initial) MRS. MARY JUINER | | | Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2015 |
| Mailing Address 2507 RUSSELL PKWY | | | Transaction ID : SA11.11403408 |
| City GREAT BEND | State KS | Zip Code 67530-2421 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | | CONTRIBUTION |
| Name of Employer RETIRED | | Occupation RETIRED | Amount of Each Receipt this Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 250.00 | |

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 33750.00 |
| TOTAL This Period (last page this line number only)...▶ | |

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